Signature

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

For office use only				
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Date

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	DEDARTMENT O	ROFFICE	RECEIVING	THE GIF	T OR	BEQUEST
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21 D 12(1) 3(100)	City, State, Zip (if different from above)
ailing Address 15-281-3274 rea Code & Telephone No. NTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE Cimberly Cheeks ame Iailing Address (if different from above) im.checks@iown.gov	City, State, Zip (if different from above)
rea Coda & Telephona No. NTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE Limborly Cheeks ame lailing Addrass (if different from above) im.cheeks@iown.gov	City, State, Zip (if different from above)
Cimberly Cheeks ame failing Address (if different from above) im.cheeks@iowa.gov	City, State, Zip (if different from above)
ame lailing Address (if different from above) im.chccks@iowr.gov	
ame lailing Address (if different from above) im.chccks@iowr.gov	
im.chcekz@iown.gov	
	Area Code & Telephone Number (if different from above)
ONOR OF GIFT OR BEQUEST:	
40L 40L 40L	
Robert G. Riley Jr./Riley Resource Group	
lame	
400 E. University Ave Pleasant Hill IA 50327	December 17, 2018 \$100.00
Aailing Address City, State, Zip Code	
515-263-0408	Date of our of Burgares
rea Code & Telephone Number	value is defined as "fair market value" of item as determined by
grileyjr@feedenetgy.com	receiving department or office. If no value mark "0.00",
Email Address (optional)	
Provide a description of the gift or bequest and purpose thereof:	
Donation - 2019 MLK Event - "I Have a Dream" to b	e held in DSM 1/19/19
Criteria to use this form:	and the second s
Receipt of any gift or bequest that is received by any department of the s	state or received by the Governor on behalf of the state.
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atement of Affirmation:	
sessment of the fair market value (if applicable) is correct and true to the	ve is accurate. I further affirm that the information concerning the donor and best of my knowledge.
sessment of the fair market value (ii applicable) is contect and little to the	, bost of thy latering ago.